UNDERGRADUATE DEGREE VERIFICATION FORM

TENNESSEE BOARD OF LAW EXAMINERS

401 Church Street, Suite 2200 Nashville, TN 37219

INSTRUCTIONS: Complete the following authorization and release statement and type or print your name and social security number in the place provided below. DO NOT write in the remainder of the form. This form should be forwarded to the Dean of your undergraduate school or other appropriate official for completion. The completed form should be forwarded directly by your undergraduate school to the office of the Tennessee Board of Law Examiners at the above address.

TO BE COMPLETED BY APPLICANT:

any documents, records, and other information pertaining to m any other pertinent data, and to permit the Tennessee Board of records and other information, I hereby release, discharge and	erson, firm, company, corporation, governmental agency, court, association, or institution having control of e to furnish to the Tennessee Board of Law Examiners any such information, including documents, records, or Law Examiners or any of their agents or representatives to inspect and make copies of such documents, exonerate the Tennessee Board of Law Examiners, its agents and representatives, and any persons so nature arising out of the furnishing or inspection of such documents, records, and other information or the rits investigating agencies.
State of)	
County of)	
	Signature of Applicant
Subscribed and sworn to before me this,	
Notary Public My Commission expires:	
Name of Applicant	Social Security Number
TO DE COMPLETED BY INDEPENDED DUATE COULON	
TO BE COMPLETED BY UNDERGRADUATE SCHOOL	•
CERTIFICATE (OF DEAN OF UNDERGRADUATE SCHOOL
	he above-named applicant attended for years, and received
	id institution. I further certify that this person's record
is clear from the standpoint of integ	grity and scholarship.
(School seal required)	
Date S	ianature of school official